

2006**CBT-100****NEW JERSEY CORPORATION BUSINESS TAX RETURN**
**FOR TAXABLE YEARS ENDING ON OR AFTER
JULY 31, 2006 THROUGH JUNE 30, 2007**
WEB

Taxable year beginning _____, _____, and ending _____, _____

Type or print the requested information. Check if address change appears below. <input type="checkbox"/>		State and date of incorporation _____	
FEDERAL EMPLOYER I.D. NUMBER _____	N.J. CORPORATION NUMBER _____	Date authorized to do business in N.J. _____	
CORPORATION NAME _____		Federal business activity code _____	
MAILING ADDRESS _____		Corporation books are in the care of _____	
CITY _____ STATE _____ ZIP CODE _____		at _____	
Check if applicable <input type="checkbox"/> Initial return <input type="checkbox"/> 1120-S filer <input type="checkbox"/> Inactive		Telephone Number (_____) _____	
		DIVISION USE	
		RP	NP
		A	R

1. Entire net income from Schedule A, line 38 (if a net loss, enter zero)	1.	
2. Allocation factor from Schedule J, Part III, line 5. Non-allocating taxpayers should not make an entry on line 2	2.	.
3. Allocated net income - Multiply line 1 by line 2. Non-allocating taxpayers must enter the amount from line 1	3.	
4. a) Total nonoperational income \$ _____ (Schedule O, Part I) (see instruction 40)		
b) Allocated New Jersey nonoperational income (Schedule O, Part III)	4(b)	
5. Total operational and nonoperational income (line 3 plus line 4(b))	5.	
6. Investment Company - Enter 40% of line 1	6.	
7. Real Estate Investment Trust - Enter 4% of line 1	7.	
8. Tax Base - Enter amount from line 5, 6 or 7, whichever is applicable	8.	
9. Amount of Tax - Multiply line 8 by the applicable tax rate (see instruction 11(a))	9.	
10. Credit for taxes paid to other jurisdictions (see instruction 34(a))	10.	
11. Subtract line 10 from line 9	11.	
12. Tax Credits (from Schedule A-3) (see instruction 46)	12.	
13. TOTAL CBT TAX LIABILITY - line 11 minus line 12	13.	
14. Alternative Minimum Assessment (Schedule AM, Part VI, line 5) <input type="checkbox"/> Check and enter zero if AMA paid by a Key Corporation (see instruction 23)	14.	
15. Tax Due (greater of line 13 or 14 or minimum tax due from Schedule A-GR or instruction 11(d))	15.	
16. Key Corporation AMA Payment (Form 401, Part II, line 5)	16.	
17. Key Corporation Throw Out Payment (Form 400)	17.	
18. Subtotal - (Sum of lines 15, 16 and 17)	18.	
19. Surtax - Enter 4% of line 18	19.	
20. Installment Payment - (Only applies if line 15 is \$500 - see instruction 47)	20.	
21. Professional Corporation Fees (Schedule PC, line 5)	21.	
22. TOTAL TAX AND PROFESSIONAL CORPORATION FEES (sum of lines 18, 19, 20 and 21)	22.	
23. Payments & Credits (see instruction 48)	23.	
a) Payments made by Partnerships on behalf of taxpayer (attach copies of all NJ-K-1's)	23a.	
24. Balance of Tax Due - line 22 minus line 23 and 23(a)	24.	
25. Penalty and Interest Due - (see instructions 7(e) and 49)	25.	Total
26. Total Balance Due - line 24 plus line 25	26.	
27. If line 23 plus 23(a) is greater than line 22 plus line 25, enter the amount of overpayment	\$	DIVISION USE
28. Amount of Item 27 to be	\$	
Credited to 2007 return	\$	
Refunded	\$	

SIGNATURE AND VERIFICATION (See instruction 14)

I declare under the penalties provided by law, that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return. If the return is prepared by a person other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

(Date)

(Signature of Duly Authorized Officer of Taxpayer)

(Title)

(Date)

(Signature of Individual Preparing Return)

(Address)

(Preparer's ID Number)

(Name of Tax Preparer's Employer)

(Address)

(Employer's ID Number)


WEB

NAME AS SHOWN ON RETURN

FEDERAL ID NUMBER

SCHEDULE A
**COMPUTATION OF ENTIRE NET INCOME (SEE INSTRUCTION 16)
EVERY CORPORATION MUST COMPLETE LINES 1 - 38 OF THIS SCHEDULE.**

1. Gross receipts or sales _____ Less returns and allowances _____	1	
2. Less: Cost of goods sold (Schedule A-2, line 8) _____	2	
3. Gross profit - Subtract line 2 from line 1 _____	3	
4. Dividends _____	4	
5. Interest _____	5	
6. Gross rents _____	6	
7. Gross royalties _____	7	
8. Capital gain net income (attach separate Federal Schedule D) _____	8	
9. Net gain or (loss) from Federal Form 4797 (attach Federal Form 4797) _____	9	
10. Other income (attach schedule) _____	10	
11. TOTAL INCOME - Add lines 3 through 10 _____	11	
12. Compensation of officers (Schedule F) _____	12	
13. Salaries and wages _____ Less jobs credit _____ Balance _____	13	
14. Repairs (Do not include capital expenditures) _____	14	
15. Bad debts _____	15	
16. Rents _____	16	
17. Taxes _____	17	
18. Interest _____	18	
19. Contributions _____	19	
20a. Depreciation from Federal Form 4562 (attach copy) _____	20a	
20b. Less depreciation claimed in Schedule A and elsewhere on return _____	20b	
	20c	
21. Depletion _____	21	
22. Advertising _____	22	
23. Pension, profit-sharing plans, etc. _____	23	
24. Employee benefit programs _____	24	
25. Domestic production activities deduction _____	25	
26. Other deductions (attach schedule) _____	26	
27. TOTAL DEDUCTIONS - Add lines 12 through 26 _____	27	
28. Taxable income before net operating loss deductions and special deductions (line 11 less line 27 must agree with line 28, page 1 of the Unconsolidated Federal Form 1120, or the appropriate line item from the Federal Forms 1120-IC-DISC, 1120-FSC or 1120-A, whichever is applicable. (see instructions 8(b) and 16(c)) _____	28	
NEW JERSEY ADJUSTMENTS -- LINES 29 - 38 MUST BE COMPLETED ON THIS FORM		
29. Interest on Federal, State, Municipal and other obligations not included in Item 5 above (see instruction 16(d)) _____	29	
30. Related interest addback (Schedule G, Part I) _____	30	
31. New Jersey State and other states taxes deducted above (see instruction 16(f)) _____	31	
32. Depreciation and other adjustments from Schedule S (see instruction 45) _____	32	
33. (a) Deduction for IRC Section 78 Gross-up not deducted at line 37 below _____	33(a)	
(b) Other deductions and additions. Explain on separate rider. (see instruction 16(h)) _____	33(b)	
(c) Elimination of nonoperational activity (Schedule O, Part I) _____	33(c)	
(d) Interest and intangible expenses and costs addback (Schedule G, Part II). _____	33(d)	
34. Entire net income before net operating loss deduction and dividend exclusion (total of lines 28 through 33 inclusive) _____	34	
35. Net operating loss deduction from Form 500 _____	35	
36. Entire Net Income before dividend exclusion (line 34 minus line 35) _____	36	
37. Dividend Exclusion from Schedule R, line 7. (see instruction 16(j)) _____	37	
38. ENTIRE NET INCOME (line 36 minus line 37 - carry to page 1, line 1) _____	38	

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SCHEDULE A-1 NET OPERATING LOSS DEDUCTION AND CARRYOVER

NOTE: SCHEDULE A-1 HAS BEEN REPLACED BY FORM 500. NET OPERATING LOSSES MUST BE DETAILED ON FORM 500 WHICH IS AVAILABLE SEPARATELY. TO OBTAIN THIS FORM AND RELATED INFORMATION, REFER TO THE INDEX ON PAGE 13.

SCHEDULE A-2 COST OF GOODS SOLD (See Instruction 18)

1. Inventory at beginning of year	1.	
2. Purchases	2.	
3. Cost of labor	3.	
4. Additional section 263A costs	4.	
5. Other costs (attach schedule)	5.	
6. Total - Add lines 1 through 5	6.	
7. Inventory at end of year	7.	
8. Cost of goods sold - Subtract line 7 from line 6. Enter here and on Schedule A, line 2	8.	

SCHEDULE A-3 SUMMARY OF TAX CREDITS (See Instruction 19)

1. HMO Assistance Fund Tax Credit from Form 310	1.	
2. New Jobs Investment Tax Credit from Form 304	2.	
3. EITHER: a) Urban Enterprise Zone Employee Tax Credit from Form 300 OR b) Urban Enterprise Zone Investment Tax Credit from Form 301	3.	
4. Redevelopment Authority Project Tax Credit from Form 302	4.	
5. Recycling Equipment Tax Credit from Form 303	5.	
6. Manufacturing Equipment and Employment Investment Tax Credit from Form 305	6.	
7. Research and Development Tax Credit from Form 306	7.	
8. Smart Moves For Business Programs Tax Credit from Form 307	8.	
9. Small New Jersey-Based High-Technology Business Investment Tax Credit from Form 308	9.	
10. Neighborhood Revitalization State Tax Credit from Form 311	10.	
11. Effluent Equipment Tax Credit from Form 312	11.	
12. Economic Recovery Tax Credit from Form 313	12.	
13. Remediation Tax Credit from Form 314	13.	
14. AMA Tax Credit from Form 315	14.	
15. Business Retention and Relocation Tax Credit from Form 316	15.	
16. Sheltered Workshop Tax Credit from Form 317	16.	
17. Film Production Tax Credit from Form 318	17.	
18. Other Tax Credits (see instruction 46(r))	18.	
19. Total tax credits taken on this return - Add lines 1 through 18. Enter here and on page 1, line 12 ..	19.	

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**ALL CORPORATIONS MUST COMPLETE THIS SCHEDULE
AND SUBMIT IT WITH THEIR CBT-100 TAX RETURN**

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SCHEDULE A-4 SUMMARY SCHEDULE (See Instruction 20)

Net Operating Loss Deduction and Carryover			7. Schedule J, Part III, line 2(h)	7.	
1. Form 500, line 6 minus line 9	1.		8. Schedule J, Part III, line 2(j)	8.	
Interest and Intangible Costs and Expenses			9. Schedule J, Part III, line 3(c)	9.	
2. Schedule G, Part I, line b	2.		Non-Operational Income Information		
3. Schedule G, Part II, line b	3.		10. Schedule O, Part III, line 31	10.	
Schedule J Information			Dividend Exclusion Information		
4. Schedule J, Part III, line 1(c)	4.		11. Schedule R, line 4	11.	
5. Schedule J, Part III, line 2(f)	5.		12. Schedule R, line 6	12.	
6. Schedule J, Part III, line 2(g)	6.		Schedule A-GR Information		
			13. Schedule A-GR, line 6	13.	
Historical Information (All Corporations)	Year 2003	Year 2004	Year 2005	Year 2006	
14. Schedule AM, Part III, line 1 . . .					
15. Schedule AM, Part III, line 2 . . .					

SCHEDULE A-5 FEDERAL IRC SECTION 199 ADJUSTMENT (See Instruction 21)

1. Federal Section 199 Domestic Production expensed in arriving at federal taxable income	1.	
2. Less: New Jersey Separate Entity Domestic Production allowed from Form 501	2.	
3. Net Section 199 adjustment - line 1 minus line 2. Include on Schedule A, line 33(b)	3.	

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SCHEDULE A-GR COMPUTATION OF NEW JERSEY GROSS RECEIPTS AND MINIMUM TAX (See Instruction 22)

1. Enter sales of tangible personal property shipped to points within New Jersey	1	
2. Enter services performed in New Jersey	2	
3. Enter rentals of property situated in New Jersey	3	
4. Enter royalties for the use in New Jersey of patents and copyrights	4	
5. Enter all other business receipts earned in New Jersey	5	
6. Total New Jersey Gross Receipts	6	
7. Enter minimum tax per instruction 11(d). Carry to page, 1 line 15	7	

SCHEDULE AM ALTERNATIVE MINIMUM ASSESSMENT FOR C CORPORATIONS (See Instruction 23)**PART I COMPUTATION OF NEW JERSEY GROSS RECEIPTS**

1. Enter sales of tangible personal property shipped to points within New Jersey	1	
2. Enter services performed in New Jersey	2	
3. Enter rentals of property situated in New Jersey	3	
4. Enter royalties for the use in New Jersey of patents and copyrights	4	
5. Enter all other business receipts earned in New Jersey	5	
6. Total New Jersey Gross Receipts	6	

PART II COMPUTATION OF NEW JERSEY GROSS PROFITS

1. Enter New Jersey Gross Receipts from Part I, line 6	1.	
2. Enter Cost of Goods Sold amount from Schedule A-2, line 8	2.	
3. Enter the Allocation Factor or Receipts Factor from Schedule J (Non-allocators enter 100%) ..	3.	
4. New Jersey Cost of Goods Sold - multiply line 2 by line 3	4.	
5. New Jersey Gross Profits - subtract line 4 from line 1	5.	

PART III GROSS SALES AND COST OF GOODS SOLD FOR CURRENT AND PRIOR YEARS

	Year 2003	Year 2004	Year 2005	Year 2006 From Part II Above
1. NJ Gross receipts				
2. NJ Cost of Goods Sold				

PART IV ALTERNATIVE MINIMUM ASSESSMENT BASED UPON GROSS PROFITS

1. New Jersey Gross Profits - enter amount from Part II, line 5; if less than \$1,000,000, enter zero on line 5 and go to Part V.	1	
2. If line 1 is greater than \$1,000,000, but not over \$10,000,000, complete line 3. If line 1 is greater than \$10,000,000 then go to line 4.		
3. (a) Maximum exclusion amount	3(a)	\$1,000,000
(b) Subtract line 3(a) from line 1	3(b)	
(c) Multiply line 3(b) by .0025	3(c)	
(d) Multiply line 3(c) by 1.11111, the NJ AMA Exclusion Rate	3(d)	
4. (a) If line 1 is greater than \$10,000,000, but not over \$15,000,000, multiply line 1 by .0035 ...	4(a)	
(b) If line 1 is greater than \$15,000,000, but not over \$25,000,000, multiply line 1 by .006 ...	4(b)	
(c) If line 1 is greater than \$25,000,000, but not over \$37,500,000, multiply line 1 by .007 ...	4(c)	
(d) If line 1 is greater than \$37,500,000, multiply line 1 by .008	4(d)	
5. AMA based on Gross Profits - amount from line 3(d) or 4(a), 4(b), 4(c), or 4(d)	5	

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PART V ALTERNATIVE MINIMUM ASSESSMENT BASED UPON GROSS RECEIPTS

1. New Jersey Gross Receipts - enter amount from Part I, line 6; if less than \$2,000,000, enter zero on line 5 and go to Part VI.	1	
2. If line 1 is greater than \$2,000,000, but not over \$20,000,000, complete line 3. If line 1 is greater than \$20,000,000 then go to line 4.		
3. (a) Maximum exclusion amount	3(a)	\$2,000,000
(b) Subtract line 3(a) from line 1	3(b)	
(c) Multiply line 3(b) by .00125	3(c)	
(d) Multiply line 3(c) by 1.11111, the NJ AMA Exclusion Rate	3(d)	
4. (a) If line 1 is greater than \$20,000,000, but not over \$30,000,000, multiply line 1 by .00175 ..	4(a)	
(b) If line 1 is greater than \$30,000,000, but not over \$50,000,000, multiply line 1 by .003 ...	4(b)	
(c) If line 1 is greater than \$50,000,000, but not over \$75,000,000, multiply line 1 by .0035 ...	4(c)	
(d) If line 1 is greater than \$75,000,000, multiply line 1 by .004	4(d)	
5. AMA based on Gross Receipts - amount from line 3(d) or 4(a), 4(b), 4(c), or 4(d)	5	

PART VI CORPORATION BUSINESS TAX/ALTERNATIVE MINIMUM ASSESSMENT

1. Enter amount from Part V, line 5, Alternative Minimum Assessment (Gross Receipts)	1	
2. Enter amount from Part IV, line 5, Alternative Minimum Assessment (Gross Profits)	2	
3. Maximum Alternative Minimum Assessment	3	\$5,000,000
4. For the first privilege period, the taxpayer has the option to select the computation of the Alternative Minimum Assessment on line 1 or 2. However, once selected, the method must be employed for that privilege period, and for the next succeeding four privilege periods. Enter your selection on line 4	4	
5. Amount of Tax - enter the lesser of line 3 or line 4. Enter this amount on line 14, page 1 of the CBT-100. If taxpayer is part of an affiliated group claiming the AMA Threshold Limit, enter zero on line 14 and go to Part VII	5	

PART VII KEY CORPORATION ELECTION

1. Enter the name of the elected Key Corporation	
2. Enter the FID Number of the Key Corporation	
3. Enter the AMA tax from Part VI, line 5	3
4. Enter the CBT liability from CBT-100, page 1, line 13, or the minimum tax, whichever is greater	4
5. Excess AMA over CBT - line 3 minus line 4 (If less than zero, enter zero)	5

Figures appearing below must be the same as year-end figures shown on the taxpayer's books. If not, explain and reconcile on rider. Consolidated returns are not permitted. See instruction 24.

SCHEDULE C RECONCILIATION OF INCOME PER BOOKS WITH INCOME PER RETURN (See Instruction 25)

1. Net income per books		7. Income recorded on books this year not included in this return (itemize)	
2. Federal income tax		(a) Tax-exempt interest \$ _____	
3. Excess of capital losses over capital gains		(b) _____	
4. Income subject to tax not recorded on books this year (itemize)		(c) _____	
_____		8. Deductions in this tax return not charged against book income this year (itemize)	
_____		(a) Depreciation \$ _____	
5. Expenses recorded on books this year not deducted in this return (itemize)		(b) Contributions Carryover \$ _____	
(a) Depreciation \$ _____		_____	
(b) Contributions Carryover \$ _____		9. Total of lines 7 and 8	
(c) Other (itemize) \$ _____		10. Income (Item 28, Schedule A) - line 6 less 9	
6. Total of lines 1 through 5			

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER
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SCHEDULE C-1 ANALYSIS OF UNAPPROPRIATED RETAINED EARNINGS PER BOOKS (See Instruction 25)

1. Balance at beginning of year		5. Distributions	
2. Net income per books		(a) Cash \$	
3. Other increases (itemize)		(b) Stock \$	
		(c) Property \$	
		6. Other decreases (itemize)	
		7. Total of lines 5 and 6	
4. Total of lines 1, 2 and 3		8. Balance end of year (line 4 less 7)	

SCHEDULE E GENERAL INFORMATION (See Instruction 26)
ALL TAXPAYERS MUST ANSWER THE FOLLOWING QUESTIONS. RIDERS MUST BE PROVIDED WHERE NECESSARY.

1. Type of business _____
Principal products handled _____
Internal Revenue Center where corresponding Federal tax return was filed _____

2. FINAL DETERMINATION OF NET INCOME BY FEDERAL GOVERNMENT (See Instruction 15)
Has a change or correction in the amount of taxable income of the reporting corporation or for any other corporation purchased, merged or consolidated with the reporting corporation, been finally determined by the Internal Revenue Service, and not previously reported to New Jersey?
"Yes" or "No" _____. If "Yes", an amended return must be filed.

3. Did one or more other corporations own beneficially, or control, a majority of the stock of taxpayer corporation or did the same interests own beneficially, or control, a majority of the stock of taxpayer corporation and of one or more other corporations?
"Yes" or "No" _____. If "Yes", give full information below (Attach rider if necessary).

Name of Controlled Corporations	Percent of Stock Owned or Controlled	By Whom Controlled

4. Is the capital stock of the taxpayer listed on any exchange? "Yes or No" _____. If yes, specify exchanges where listed and submit taxpayer's Annual Report to stockholders for the period covered by this return.

5. Is this corporation a Professional Corporation (PC) formed pursuant to NJSA 14A:17-1 et.seq. or any similar law from a possession or territory of the United States, a state, or political subdivision thereof? "Yes or No" _____. If yes, go to the next question.

How many licensed professionals are owners, shareholders, and/or employees from this PC as of the first day of the privilege period? _____. Attach a rider providing the names, addresses, and FID or SS numbers of the licensed professionals in the PC. If the number of licensed professionals is greater than 2, complete Schedule PC-Per Capita Licensed Professional Fee. See instruction 43 for examples of licensed professionals.

6. **This question must be answered by corporations with income from sources outside the United States.**
(a) Is income from sources outside the United States included in entire net income at line 38 of Schedule A. "Yes or No" _____.
(b) If the answer is "No", set forth such items of gross income, the source, the deductions and the amount of foreign taxes paid thereon. Enter at line 33(b), Schedule A, the difference between the net of such income and the amount of foreign taxes paid thereon not previously deducted.

7. During the period covered by the return, did the taxpayer acquire or dispose of directly or indirectly a controlling interest in certain commercial property? "Yes or No" _____.

SCHEDULE F CORPORATE OFFICERS - GENERAL INFORMATION AND COMPENSATION (See Instruction 27)

(1) Name and Current Address of Officer	(2) Social Security Number	(3) Title	(4) Dates Employed in this position From To	(5) Percent of Corporation Stock Owned Common Preferred	(6) Amount of Compensation

(a) Total compensation of officers	
(b) Less: Compensation of officers claimed elsewhere on the return	
(c) Balance of compensation of officers (enter here and on Schedule A, line 12, page 2)	

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SCHEDULE G - PART I INTEREST (See Instruction 28)

1. Was interest paid, accrued or incurred to a related member(s), deducted from entire net income?

"Yes" or "No" _____. If "Yes", fill out the following schedule.

Name of Related Member	Federal ID Number	Relationship to Taxpayer	Amount Deducted

- (a) Total amount of interest deducted
- (b) Less: Exceptions (see instruction 28) ()
- (c) Balance of interest deducted (carry to Schedule A, line 30)

SCHEDULE G - PART II INTEREST EXPENSES AND COSTS AND INTANGIBLE EXPENSES AND COSTS (See Instruction 28)

1. Were intangible expenses and costs including intangible interest expenses and costs, paid, accrued or incurred to related members, deducted from entire net income? "Yes" or "No" _____. If "Yes", fill out the following schedule.

Name of Related Member	Federal ID Number	Relationship to Taxpayer	Type of Intangible Expense Deducted	Amount Deducted

- (a) Total amount of intangible expenses and costs deducted
- (b) Less: Exceptions (see instruction 28) ()
- (c) Balance of intangible expenses and costs deducted (carry to Schedule A, line 33(d))

SCHEDULE H TAXES (See Instructions 16(f) and 29)

Include all taxes paid or accrued during the accounting period wherever deducted on Schedule A.

	(a) Corporation Franchise/Business Taxes*	(b) Corporation Business/Occupancy Taxes*	(c) Property Taxes	(d) U.C.C. or Payroll Taxes	(e) Other Taxes (attach schedule)	(f) Total
1. New Jersey Taxes						
2. Other States & U.S. Possessions						
3. City and Local Taxes						
4. Taxes Paid to Foreign Countries						
5. Total						
6. Combine lines 5(a) and 5(b)						
7. Sales & Use Taxes Paid by a Utility Vendor						
8. Add lines 6 and 7 - Carry to Schedule A, line 31.						
9. Federal Taxes						
10. Total (Combine line 5 and line 9)						

*Include on line 4 taxes paid or accrued to any foreign country, state, province, territory, or subdivision thereof.

**Parts I, II, III,
IV, V and VI**

ALL TAXPAYERS WHO MAINTAIN A REGULAR PLACE OF BUSINESS OUTSIDE OF NEW JERSEY REGARDLESS OF THE AMOUNT OF ENTIRE NET INCOME REPORTED ON SCHEDULE A, LINE 38, OF THE CBT-100 SHOULD COMPLETE SCHEDULE J. THIS SCHEDULE SHOULD BE OMITTED IF THE TAXPAYER DOES NOT MAINTAIN A REGULAR PLACE OF BUSINESS OUTSIDE THIS STATE OTHER THAN A STATUTORY OFFICE, IN WHICH CASE THE TAX LAW REQUIRES THE ALLOCATION FACTOR TO BE 100% (1.000000).

PART I ALL ALLOCATING COMPANIES MUST ANSWER THE FOLLOWING QUESTIONS (See Instruction 32)

- (a) State the number of regular corporate places of business maintained outside this State (See instruction 32(b)) _____
- (b) List the address of at least one such regular place of business _____
- (c) List the States in which the taxpayer maintained a permanent and continuous place of business, indicating type of establishment, such as warehouse, factory, store, office, etc. _____
- (d) Give the address of every factory, warehouse, store, or other place of business in New Jersey, indicating type of establishment _____
- (e) Number of people employed (average) in New Jersey _____ outside New Jersey _____
- (f) Explain in detail internal controls used in distribution of receipts in and out of New Jersey, as shown in Part III, line 2 _____
- (g) State the location of the actual seat of management or control of the corporation _____

PART II **AVERAGE VALUES (See Instruction 33)**

- (b) The average values of real and tangible personal property *owned* are to be computed on the basis of the average book values thereof and not on original cost. Rented or leased property is valued at 8 times the annual rent, including any amounts paid or accrued in addition to or in lieu of rent during the period covered by the return. All other property which is used by the taxpayer but is neither owned, rented or leased, should be valued at book value, however, if no such book value exists, the market value of the property should be used.
- (c) The frequency upon which the amounts in Columns A and B below have been averaged is _____ (See instruction 33).

ASSETS	AVERAGE VALUES (See instruction 33) (Omit Cents)		DIVISION USE ONLY
	Column A - New Jersey	Column B - Everywhere	
1. Land			
2. Buildings and other Improvements			
3. Machinery and Equipment			
4. Inventories			
5. All other Tangible Personalty Owned (Itemize on Rider)			
6. Property rented or leased (8 x Annual Rent)			
7. All other Property Used			
8. <i>Total Real and Tangible Personal Property</i>			

PART III **COMPUTATION OF ALLOCATION FACTOR (See Instruction 34)**

		COLUMN A (omit cents)	COLUMN B
1. Average value of the taxpayer's real and tangible personal property:			
(a) In New Jersey (Part II, Column A, line 8)	1(a)		
(b) Everywhere (Part II, Column B, line 8)	1(b)		
(c) Percentage in New Jersey (line 1(a) divided by line 1(b)). Enter in Column B.			1(c) . [][][][][][][]
2. Receipts:			Complete by carrying the fraction to six (6) decimal places. Do not express as a percent. Example: $\frac{123,456}{1,000,000} = . [1] [2] [3] [4] [5] [6]$
(a) From sales of tangible personal property shipped to points within New Jersey.	2(a)		
(b) From services performed in New Jersey	2(b)		
(c) From rentals of property situated in New Jersey	2(c)		
(d) From royalties for the use in New Jersey of patents and copyrights	2(d)		
(e) All other business receipts earned in New Jersey. (See instruction 34(d))	2(e)		
(f) Total New Jersey receipts (Total of lines 2(a) to 2(e), inclusive, in Column A)	2(f)		
(g) Total receipts from all sales, services, rentals, royalties and other business transactions everywhere.	2(g)		
(h) Less Nonsourced Receipts (see instruction 34(e))	2(h)	([])	
(i) Total Everywhere Receipts allowable (line 2(g) minus line 2(h))	2(i)		
(j) Percentage in New Jersey (line 2(f) divided by line 2(i). Enter in Column B.			2(j) . [][][][][][][]
(k) Double-weighted receipts factor (Enter 2(j))			2(k) . [][][][][][][]
3. Wages, salaries and other personal service compensation (See instruction 34(g))			
(a) In New Jersey	3(a)		
(b) Everywhere	3(b)		
(c) Percentage of New Jersey (line 3(a) divided by line 3(b)). Enter in Column B.			3(c) . [][][][][][][]
4. Sum of New Jersey percentages shown at lines 1(c), 2(j), 2(k), and 3(c) Enter in Column B.			4 . [][][][][][][]
5. Allocation Factor (line 4 divided by four, or by the number of percentages included on line 4 See instruction 34(h)). Enter in Column B and carry to Line 2, page 1, of the CBT-100.			5 . [][][][][][][]

NAME AS SHOWN ON RETURN	FEDERAL ID NUMBER
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PART IV COMPUTATION OF THROW OUT RECEIPTS (See Instruction 35)

Name of the Jurisdiction in which Receipts are Sourced	Total Receipts from all Sales, Services, Rental, Royalties, and Other Business Transactions
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
TOTAL - Add lines 1 through 10. Carry to Schedule J, Part III, line 2(h)	

PART V KEY CORPORATION DESIGNATION (See instruction 36)

All taxpayers claiming the throw out limitation must designate a key corporation and complete Part VI below. The key corporation will be responsible for remitting the additional tax. The key corporation must complete Form 400.

Name: _____ FID# _____

PART VI COMPUTATION OF THE THROW OUT TAX EFFECT FOR LIMITATION (See Instruction 36)

1. Entire net income from Schedule A, line 38	1.	
2. Allocation factor from Schedule J, line 5.	2.	
3. Allocated net income - Multiply line 1 by line 2.	3.	
4. Tax Rate (See Instruction 11(a))	4.	
5. Gross Tax Liability - Multiply line 3 by line 4	5.	
6. Less Tax Credits	6.	()
7. Net Tax Liability - line 5 minus line 6	7.	
8. Surtax - Multiply line 7 by .04	8.	
9. Total Tax Liability - line 7 plus line 8	9.	
10. Property Fraction (Schedule J, Part III, line 1(c))	10.	
11. Wage Fraction (Schedule J, Part III, line 3(c))	11.	
12. Total New Jersey Receipts (Schedule J, Part III, line 2(f))	12.	
13. Total Everywhere Receipts (Schedule J, Part III, line 2(g))	13.	
14. Receipts Fraction (line 12 divided by line 13)	14.	
15. Double Weight Receipts (enter amount from line 14)	15.	
16. Total (line 10 plus line 11 plus line 14 plus line 15)	16.	
17. Allocation Factor (line 16 divided by 4) Carry to Page 1, line 2	17.	
18. Entire Net Income from Schedule A, line 38	18.	
19. Allocated Net Income - Multiply line 17 by line 18	19.	
20. Tax Rate (from line 4)	20.	
21. Gross Tax Liability - Multiply line 19 by line 20	21.	
22. Less Tax Credits	22.	()
23. Net Tax Liability (line 21 minus line 22)	23.	
24. Surtax - Multiply line 23 by .04	24.	
25. Total Tax Liability - line 23 plus line 24	25.	
26. Throw Out Tax Income (line 9 minus line 25) This amount should be carried to Form 400 of the CBT-100 filed by the designated key corporation.	26.	

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SCHEDULE L**INVESTMENT COMPANIES (See Instruction 37)**

1. **DEFINITION OF INVESTMENT COMPANY:** "Investment company" shall mean any corporation whose business during the period covered by its report consisted to the extent of at least 90% thereof, of holding, investing and reinvesting in stocks, bonds, notes, mortgages, debentures, patents, patent rights and other securities, for its own account. But this shall not include any corporation which: (1) is a merchant or a dealer of stocks, bonds and other securities, regularly engaged in buying the same and selling the same to customers; or (2) had less than 90% of its average gross assets in New Jersey, at cost, invested in stocks, bonds, debentures, mortgages, notes, patents, patent rights or other securities or consisting of cash on deposit during the period covered by its report; or (3) is a banking corporation or a financial business corporation as defined in the Corporation Business Tax Act.
2. **NOTE:** If taxpayer does not qualify under this definition, it is not entitled to report as an investment company.
3. In order to qualify as an investment company, taxpayer *must submit* a schedule showing that it meets the following three-part business test and the assets test.
 - (a) i **Income Adjusted:** For purposes of the 90% requirement above, taxpayer, during the entire period covered by its report, must have derived 90% or more of its total income before deductions as reported for Federal income tax purposes from cash and/or investment type assets. Total income before deductions as reported for Federal income tax purposes must be adjusted as follows:
 - (1) Add gross receipts or gross sales adjusted for gross profit (loss) reported for Federal income taxes;
 - (2) Add gross sales price from the disposition of assets adjusted for capital gain or loss or net gain or loss reported for Federal income taxes;
 - (3) Add interest on Federal, State, municipal and other obligations included in determining New Jersey net income, but not otherwise included in Federal total income;
 - (4) Do not add any capital loss carry back or carry forward in computing total income.
 - ii **Income Unadjusted:** For purposes of the 90% requirement above, taxpayer during the entire period covered by its report, must have derived 90% or more of its total income before deductions as reported for Federal income tax purposes from cash and/or investment type assets, plus interest on Federal, State municipal and other obligations not otherwise included in Federal taxable income and exclusive of any capital loss carry back or carry forward.
 - (1) A gain resulting from the disposition of an asset and reported on the installment basis for Federal income taxes is considered income for purposes of the investment company statute in the year in which the installment is received under both 3(a) i and ii above. Income reported on the installment basis is treated as investment type income only if it is generated by the sale of an investment type asset. Interest income received in conjunction with each installment is deemed investment type income.
 - iii **Deductions:** For purposes of the 90% requirement above, taxpayer, during the entire period covered by its report, must have incurred 90% or more of its total deductions as reported for Federal income tax purposes for holding, investing and reinvesting in cash and/or investment type assets.
 - (b) **Assets test:** For purposes of the 90% requirement provided by 1.(2) above, at least 90% of the taxpayer's gross assets located in New Jersey, valued at cost, must consist of cash and/or investment type assets, during the period covered by its report.
4. The election to report as an investment company is effective only for the particular year covered by the return and if desired for a subsequent year must be renewed.
5. The minimum tax is computed in accordance with instruction 11(d) and Schedule A-GR.

SCHEDULE M REGULATED INVESTMENT COMPANIES AND REAL ESTATE INVESTMENT TRUSTS**REGULATED INVESTMENT COMPANIES -****GENERAL INFORMATION (See Instruction 38)**

1. Is this taxpayer registered and regulated under the Federal Investment Company Act of 1940 (54 Stat. 789, as amended)?

"Yes" or "No" _____

If "Yes", give registration number and date of registration with the Securities and Exchange Commission:

Reg No. _____ Date _____

IMPORTANT NOTE: If the taxpayer's certificate under the Act was not obtained prior to the commencement of the period covered in the return or if such authority was not continued during such entire period, then the taxpayer is not entitled to report as a Regulated Investment Company.

2. Has the taxpayer satisfied the requirements of Chapter 1, Subchapter M, Part I, Section 852(a) of the Federal Internal Revenue Code? "Yes" or "No" _____. If "No", taxpayer is not entitled to report as a Regulated Investment Company.

3. Every taxpayer seeking to report as a regulated investment company **MUST SUBMIT WITH THIS RETURN ITS PRINTED ANNUAL REPORT TO STOCKHOLDERS** for the period covered by this return together with all other stockholder reports issued by the company during such period.

4. The tax liability for a Regulated Investment Company is computed in accordance with instruction 11(d) and Schedule A-GR and should be reported on Line 9, page 1 of the return.

REAL ESTATE INVESTMENT TRUSTS -**GENERAL INFORMATION (See Instruction 38)**

1. Is the taxpayer a corporation, unincorporated trust or unincorporated association which is qualified and has elected to be taxed as a real estate investment trust under Federal law?

"Yes" or "No" _____.

NAME AS SHOWN ON RETURN

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SCHEDULE P SUBSIDIARY INVESTMENT ANALYSIS (See Instruction 41)

NOTE: Taxpayers must hold at least 80% of the combined voting power of all classes of stock entitled to vote and at least 80% of the total number of shares of all other classes of stock, except non-voting stock which is limited and preferred as to dividends, for each subsidiary. Do not include advances to subsidiaries in book value.

(1) Name of Subsidiary	(2) Percentage of Interest		(3) Book Value (as reported in Schedule B)	(4) Dividend Income (as reported in Schedule A)
	Voting	Non-Voting		
Totals				

SCHEDULE P-1 PARTNERSHIP INVESTMENT ANALYSIS (See Instruction 42)

(1) Name of Partnership LLC, or Other Entity and Federal ID Number	(2) Date and State where Organized	(3) Percentage of Ownership	(4)		(5)		(6)		(7) Tax Payments Made on Behalf of Taxpayer by Partnerships
			Limited Partner	General Partner	Tax Accounting Flow Through	Method Separate Accounting	New Jersey Nexus Yes	No	
Total Column 7									

SCHEDULE PC PER CAPITA LICENSED PROFESSIONAL FEE (See Instruction 43)

1 (a). Enter number of resident and non-resident professionals with physical nexus with New Jersey _____ x \$150	1(a)	
1(b). Enter number of non-resident professionals without physical nexus with New Jersey _____ x \$150 x allocation factor of the PC	1(b)	
1(c). Total Fee Due - Add lines 1(a) and line 1(b)	1(c)	
2. Installment Payment - 50% of line 1(c)	2.	
3. Total Fee Due (line 1(c) plus line 2)	3.	
4. Less prior year 50% installment payment and credit (if applicable)	4.	()
5. Balance of Fee Due (line 3 minus line 4). If the result is zero or above, enter this amount on page 1, line 21 ...	5.	
6. Credit to next year's Professional Corporation Fee (if line 5 is below zero, enter the amount here)	6.	

SCHEDULE Q QUALIFIED SUBCHAPTER S SUBSIDIARIES (QSSS)

1. Does this corporation own any Qualified Subchapter S Subsidiaries? Yes _____ No _____
If yes, list all the QSSS's names, addresses, and FID#'s below. Attach additional rider if necessary. Separately note those subsidiaries that have made a New Jersey QSSS election and whose activities are included in this return.

SCHEDULE R DIVIDEND EXCLUSION (See Instruction 44)

1. Dividend income included in Schedule A	1.	
2. Less: Dividend Income - Schedule P, Column (4)	2.	()
3. Balance (line 1 less line 2)	3.	
4. Less: Dividend income from investments where taxpayer owns less than 50% of voting stock and less than 50% of all other classes of stock	4.	()
5. Balance (line 3 less line 4)	5.	
6. 50% of line 5	6.	
7. DIVIDEND EXCLUSION: Line 2 plus line 6 (Carry to Schedule A, line 37)	7.	

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SCHEDULE S - PART I DEPRECIATION AND SAFE HARBOR LEASING (See Instruction 45)

1. Section 179 Deduction	1	
2. Special Depreciation Allowance - for certain property acquired after September 10, 2001	2	
3. a) MACRS - for assets placed in service during accounting periods beginning on and after July 7, 1993	3(a)	
b) MACRS - included in line 3(a) for assets on which bonus depreciation and excess section 179 depreciation taken	3(b)	
4. MACRS - for assets placed in service during accounting periods beginning prior to July 7, 1993	4	
5. ACRS	5	
6. Other Depreciation - for assets placed in service after December 31, 1980	6	
7. Other Depreciation - for assets placed in service prior to January 1, 1981	7	
8. Listed Property - for assets placed in service during accounting periods beginning on and after July 7, 1993	8	
9. Listed Property - for assets placed in service during accounting periods beginning prior to July 7, 1993	9	
10. Total depreciation claimed in arriving at line 28, Schedule A	10	

Attach Federal Form 4562 to Return and Include Federal Depreciation Worksheet

Adjustments at Line 32, Schedule A - Depreciation and Certain Safe Harbor Lease Transactions

11. Additions

(a) Amounts from lines 3(b), 4, 5, 6 and 9 above a. _____

(b) Special Depreciation Allowance - for assets placed in service during accounting periods beginning on and after January 1, 2002, and for which federal 30% or 50% bonus depreciation was taken in the current tax year. Include the initial 30% or 50% bonus amount and the regular depreciation on the adjusted basis. b. _____

(c) Distributive share of ACRS and MACRS from a partnership c. _____

(d) Deductions on Federal return resulting from an election made pursuant to IRC Section 168(f)8 exclusive of elections made with respect to mass commuting vehicles.

Interest _____

Rent _____

Amortization of Transactional Costs _____

Other Deductions d. _____

(e) Section 179 depreciation in excess of New Jersey allowable deduction. Fiscal year filers refer to instruction 45 e. _____

Total line 11 (lines a, b, c, d and e) 11 _____

12. Deductions

(a) New Jersey depreciation - (From Schedule S, Part II(A)) a. _____

(b) New Jersey depreciation - (From Schedule S, Part II(B)) b. _____

(c) Recomputed depreciation attributable to distributive share of recovery property from a partnership c. _____

(d) Any income included in the return with respect to property described at line 11(d) solely as a result of that election d. _____

(e) The lessee/user should enter the amount of depreciation which would have been allowable under the Internal Revenue Code at December 31, 1980 had there been no safe harbor lease election e. _____

(f) Excess of accumulated ACRS, MACRS, or bonus depreciation over accumulated NJ depreciation on physical disposal of recovery property (attach computations) . f. _____

Total line 12 (lines a, b, c, d, e and f) 12 _____

13. **ADJUSTMENT** - (line 11 minus line 12) Enter at line 32, Schedule A 13 _____

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SCHEDULE S - PART III NEW JERSEY DEPRECIATION FOR GAS, ELECTRIC, AND GAS AND ELECTRIC PUBLIC UTILITIES
 (See Instruction 45)

1. Total depreciation claimed in arriving at Schedule A, line 28 1. _____
 2. Federal depreciation for assets placed in service after 1-1-98 2. _____
 3. Net (Subtract line 2 from line 1) 3. _____
 4. New Jersey depreciation allowable on the Single Asset Account (Assets placed in service prior to 1-1-98)
 - (a) Total adjusted Federal depreciable basis as of 12-31-97 a. _____
 - (b) Excess book depreciable basis over Federal tax basis
as of 12-31-97 b. _____
 - (c) Less accumulated Federal basis for all Single Asset Account
property sold, retired or disposed of to date c. _____
 - (d) Total (line 4a plus line 4b less line 4c) d. _____
 5. New Jersey Depreciation (Divide line 4(d) by 30) 5. _____
 6. New Jersey Adjustment
 - (a) Depreciation adjustment for assets placed in service prior to
1/1/98 (subtract line 5 from line 3) a. _____
 - (b) Special bonus depreciation adjustment from Schedule S,
Part I, line 13 b. _____
 7. Total Adjustment (add lines 6(a) and 6(b)). Enter at line 32, Schedule A 7. _____
-

**State of New Jersey
Division of Taxation**

CERTIFICATION OF INACTIVITY

For the period beginning _____, _____ and ending _____, _____

Corporation Name

Federal ID Number

(NOTE: Attach this schedule to the taxpayer's CBT-100 or CBT-100S, whichever is applicable)

I certify that during the period covered by the attached tax return, the above named taxpayer had no business activities, no income, no assets, and, additionally in the case of a New Jersey S corporation, made no distributions and did not have any change in ownership.

Signature of Corporate Officer

Title

Date

INSTRUCTIONS

In lieu of completing the entire CBT-100 or CBT-100S tax return, an inactive corporation may complete this schedule and pages 1 through 4 of the CBT-100 or pages 1 through 5 of the CBT-100S in order to fulfill its filing obligations with the State of New Jersey. An inactive corporation is a corporation that, during the entire period covered by the tax return, did not conduct any business, did not have any income, receipts or expenses, did not own any assets, and, additionally for New Jersey S corporations, did not make any distributions and did not have any change in ownership.

This schedule and the applicable pages from the Corporation Business Tax return must be filed annually by the taxpayer. Taxpayers must report the minimum tax liability, the surtax, and the installment payment (if applicable) on page 1 of the Corporation Business Tax return and submit the balance due with the Form CBT-100-V or Form CBT-100S-V, the Corporation Business Tax Payment Voucher.

Schedule I and page 1 of the Corporation Business Tax return must be signed by an officer of the corporation who is authorized to attest to the truth of the statements contained therein.